

Fill in this information to identify the case:

Debtor name	UMAPM Holding Company LLC
United States Bankruptcy Court for the:	District of Minnesota
Case number (If known):	24-43262 (State)

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$ 2,624,367.38

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$ 2,624,367.38

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*

\$ 2,602,530.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F*

\$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*

+\$ 272,237.95

4. **Total liabilities**

Lines 2 + 3a + 3b

\$ 2,874,767.95

Fill in this information to identify the case:

Debtor name UMAPM Holding Company LLC

United States Bankruptcy Court for the: District of Minnesota

Case number (If known): 24-43262

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest		
2. Cash on hand	\$ 0.00		
3. Checking, savings, money market, or financial brokerage accounts (Identify all)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. Entre Bank	Checking	6 5 9 6	\$ 93,661.11
3.2. Choice Bank	Checking	7 4 0 5	\$ 1,685.00
4. Other cash equivalents (Identify all)			
4.1.	\$		
4.2.	\$		
5. Total of Part 1	\$ 95,346.11		

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1.	\$
7.2.	\$

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____	\$ _____
8.2. _____	\$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less: <u>288,513.27</u>	- <u>0.00</u>	= →	\$ <u>288,513.27</u>
face amount	doubtful or uncollectible accounts		
11b. Over 90 days old: <u>2,699.00</u>	- <u>2,699.00</u>	= →	\$ <u>0.00</u>
face amount	doubtful or uncollectible accounts		

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 288,513.27**Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____	_____ %	_____	\$ _____
15.2. _____	_____ %	_____	\$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?** No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials Components & Other Raw Material	MM / DD / YYYY	\$ _____	Cost	74,669.00 \$ _____
20. Work in progress Work In Progress	MM / DD / YYYY	\$ _____	Liquidation	0.00 \$ _____
21. Finished goods, including goods held for resale Finished Goods	MM / DD / YYYY	\$ _____	Cost	103,589.00 \$ _____
22. Other inventory or supplies	MM / DD / YYYY	\$ _____		\$ _____
23. Total of Part 5				\$ 178,258.00

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable? No Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value _____ Valuation method _____ Current value _____**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?** No Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?** No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$ _____		\$ _____
29. Farm animals Examples: Livestock, poultry, farm-raised fish	\$ _____		\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)	\$ _____		\$ _____
31. Farm and fishing supplies, chemicals, and feed	\$ _____		\$ _____
32. Other farming and fishing-related property not already listed in Part 6	\$ _____		\$ _____

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative? No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ _____ Valuation method _____ Current value \$ _____**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture	\$ _____	_____	\$ _____
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software See continuation sheet	\$ 0.00	_____	\$ 20,000.00
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____
43. Total of Part 7.			\$ 20,000.00

Add lines 39 through 42. Copy the total to line 86.

44. Is a depreciation schedule available for any of the property listed in Part 7? No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment
(excluding farm machinery and equipment)**

See continuation sheet

\$ 0.00 _____ \$ 2,042,250.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ 2,042,250.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
 Yes

Part 9: Real property**54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
26833 5th St. W. Zimmerman, MN 55398	Leasehold	\$ _____	_____	\$ 0.00
55.1				
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____
56. Total of Part 9.				\$ 0.00

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9? No Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?** No Yes**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites Website, logo, etc.	\$ _____	_____	Unknown \$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____
66. Total of Part 10.			\$ 0.00

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

0.00	—	0.00	= ➔	\$ 0.00
Total face amount		doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

	Tax year	\$ _____
	Tax year	\$ _____
	Tax year	\$ _____

73. Interests in insurance policies or annuities

	\$ _____
--	----------

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Potential Claim Against Tom McChesney

	\$ Unknown
--	------------

Nature of claim Unauthorized Post-Sale Personal Exp

Amount requested \$ 0.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Nature of claim

Amount requested \$ _____

76. Trusts, equitable or future interests in property

	\$ _____
--	----------

77. Other property of any kind not already listed Examples: Season tickets, country club membership

	\$ _____
	\$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

	\$ 0.00
--	---------

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 95,346.11	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 288,513.27	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 178,258.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 20,000.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 2,042,250.00	
88. Real property. Copy line 56, Part 9. →	\$ 0.00	
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 2,624,367.38	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	2,624,367.38	\$ 2,624,367.38

Debtor 1

First Name _____ Middle Name _____ Last Name _____

Case number (if known) _____

Continuation Sheet for Official Form 206 A/B

41) Office equipment, including all computer equipment and communication systems equipment and software

General description Net book value Valuation method Current value

Office & Business Liquidation 20,000.00

Equipment

Ricoh C2004EX Leased 0.00

Copier

50) Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

General description Net book value Valuation method Current value

2023 MX-330 Leased 0.00

(SN23011)

See Schedule A/B Liquidation 2,042,250.00

Part 8, Question

50 Attachment

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
					CNC MACHINES AND ACCESSORIES					
1	1	U5	Fadal	904-1	Machining center, vertical, CNC, 3 axis, ~16" x 30" table, 20 position automatic tool changer, 40 taper spindle, Fadal CNC 88HS controls, associated accessories and attributes.	9906908	1999	4	8,000	5,000
2	1	U65	Haas	UMC-750	Machining center, vertical / universal, CNC, 5 axis, integrated dual axis rotary trunnion table, 40 position automatic tool changer, 40 taper spindle, Haas controls, chip conveyor, associated accessories and attributes.	1154669	2018	3	120,000	100,000
3	1	U10	Haas	VF-1D	Machining center, vertical, CNC, 3 axis, ~14" x 26" table, 20 position automatic tool changer, 40 taper spindle, Haas controls, associated accessories and attributes.	35386	2004	3	20,000	15,000
4	1	U66	Haas	VF-2SS	Machining center, vertical, CNC, 5 axis, ~15" x 36" table, 30 position automatic tool changer, 40 taper spindle, Haas controls, chip conveyor, associated accessories and attributes.	1157956	2018	3	60,000	45,000
5	1	U48	Haas	VF-4SS	Machining center, vertical, CNC, 4 axis, ~19" x 52" table, 40 position automatic tool changer, 40 taper spindle, Haas controls, associated accessories and attributes.	115306	2014	3	60,000	45,000
6	1	U59	Stratasys	uPrint SE Plus	Printer, 3D, CNC, 8" x 8" x 6" build area, nine color, personal ABS bench top type.	P60040	2016	3	10,000	7,500

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
7	1	U9	Citizen	A20-VIPL	Turning center, CNC, Swiss type, 7 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Edge C320 bar feeder, associated accessories and attributes.	AC5060	2008	3	60,000	45,000
8	1	U41	Citizen	A20-VIPL	Turning center, CNC, Swiss type, 7 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Edge C320 bar feeder, associated accessories and attributes.	AC7042	2012	3	80,000	65,000
9	1	U7	Citizen	A20-VIPL	Turning center, CNC, Swiss type, 7 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Edge C320 bar feeder, associated accessories and attributes.	AC0314	2008	3	60,000	45,000
10	1	U46	Citizen	A32-2M7P	Turning center, CNC, Swiss type, 7 axis, gang tool type, 1.259" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, chip conveyor, Edge C-332 bar feeder, associated accessories and attributes.	V25091	2013	3	120,000	90,000
11	1	U63	Citizen	L12-1M7	Turning center, CNC, Swiss type, 7 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizen CAV12-LE-IS bar feeder, associated accessories and attributes.	F51460	2017	3	130,000	100,000

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
12	1	U67	Citizen	L20E-2M10	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizen CAU20-L2E-IS bar feeder, associated accessories and attributes.	L220EA/2264	2019	3	200,000	160,000
13	1	U74	Citizen	L20E-2M10	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizen CAU20-L2E-IS bar feeder, associated accessories and attributes.	L220EA/3079	2021	2	225,000	180,000
14	1	U73	Citizen	L20E-2M10	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizen CAU20-L2E-IS bar feeder, associated accessories and attributes.	L220EA/3074	2021	2	225,000	180,000
15	1	U58	Citizen	L20E-2M12	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizen CAU20-L2E-IS bar feeder, associated accessories and attributes.	QF0587	2016	3	160,000	130,000
16	1	U8	Citizen	L20-VIII	Turning center, CNC, Swiss type, 7 axis, gang tool type, 0.787" bar capacity, sub-spindle, Citizen controls, high pressure coolant system, mist collector, Citizens CAV20-iS bar feeder, associated accessories and attributes.	Q16312	2007	3	70,000	55,000

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
17	1	U3	KIA	Super KIA Turn 15	Turning center, CNC, 2 axis, ~10.6" swing x 16.14" centers, 1.89" spindle bore, 12 position turret, tailstock, Fanuc 21-T controls, associated accessories and attributes.	SKT150360	2000	3	12,000	9,000
18	1	U43	Mazak	QTS200	Turning center, CNC, 3 axis, ~24" swing x 20" centers, 2.6" spindle bore, 12 position turret, tailstock, Mazatrol Smart controls, associated accessories and attributes.	252292	2013	3	55,000	40,000
19	1	U39	Tsugami	S205	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Fanuc 32i Model B controls, high pressure coolant system, mist collector, FMB Minimag 20 bar feeder, associated accessories and attributes.	318	2011	3	85,000	60,000
20	1	U40	Tsugami	S206	Turning center, CNC, Swiss type, 8 axis, gang tool type, 0.787" bar capacity, sub-spindle, Fanuc 32i Model B controls, high pressure coolant system, mist collector, FMB Minimag 20 bar feeder, associated accessories and attributes.	545	2011	3	85,000	60,000
21	1	U37	Tsugami	SS207	Turning center, CNC, Swiss type, 5 axis, gang tool type, 0.787" bar capacity, sub-spindle, Fanuc 32i Model B controls, high pressure coolant system, mist collector, FMB Minimag 20 bar feeder, associated accessories and attributes.	108	2010	3	70,000	50,000
22	1	U20	Makino	DUO 43	EDM machine, CNC, wire type, 5 axis, ~24" x 28" work zone, Makino MGW-S6 controls, chiller, filtration system, associated accessories and attributes.	W120047	2008	3	40,000	32,000

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
23	1		Yuasa	TPDX-50	CNC machining center accessory, 4th axis collet closer, with controls.			3	2,500	1,800
24	1		Haas	HA5C	CNC machining center accessory, 4th axis indexer.	D12826		3	5,000	3,500
25	1		Haas	HRT160	CNC machining center accessory, 4th axis rotary table, with custom built trunnion.	170858		NS	2,500	1,800
26	2		Haas	HTS4	CNC machining center accessories, manual tailstock.	10/14		3	1,500	1,200
27	1		Haas	TRT160 <i>(assumed)</i>	CNC machining center accessory, 5th axis tilting rotary table.			2	28,000	20,000
28	1		Haimer	PC2006 Economic Plus	Tooling shrink-fit machine, benchtop type.	7201517	2018	3	12,000	9,000
29	1				CNC machine tooling and accessories (Group) including, however not limited to machining center tool holders, turning center static and live turret tools, turning center and Swiss lathe tooling, chucks, adapters, inserts, sleeve holders, tool setting fixtures, angle and set up plates, tool bits, drills, cutters, related items.			3	100,000	60,000
					MANUAL MACHINES AND SECONDARY EQUIPMENT					
30	1	U69	Mass Finishing	HZ-40	Deburring and finishing machine, rotary / centrifugal tumbler, 1.4 cubic foot capacity, (6) baskets.	26537H	2020	2	18,000	15,000
31	1		Jet	J-4300A	Grinder, 6" belt, tilting head, cabinet base.	18110018	2018	3	1,500	1,200
32	1	U2	Hardinge	HC	Lathe, automatic chuck / hand screw, 8 position turret.			4	3,500	2,500

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
33	1	U54	Bridgeport / Hardinge		Milling machine, vertical knee, CNC, 2 axis, variable speed spindle, 9" x 48" table, controls, associated accessories and attributes.	HDNG1809	2006	3	12,000	9,000
34	1	U1	Bridgeport	EZ Trak	Milling machine, vertical knee, CNC, 2 axis, variable speed spindle, 9" x 48" table, Syncmaster 150N controls, Procurler tapping head, associated accessories and attributes.	BR281175E	2001	3	10,000	7,500
35	1	Y64	Grieve	HA-1250	Oven, heat treating, electric, 1250° F, 20 KW, 20" x 20" x 20".	121172A1117	2017	3	15,000	9,000
36	1		Magido	L902FP	Parts washer, heated, top load, stainless steel.	19.902.102	2019	3	6,000	4,500
37	1	U17	Denison	Multipress	Press, hydraulic, 8 ton.	19317	1966	4	1,500	1,200
38	1	U44	Clausing Kalamazoo	KC12AX	Saw, horizontal metal cutting band, ~12" x 12" capacity, automatic, clamping, with infeed roller conveyor.	H10214076	2013	3	12,000	9,000
39	1		Roll-In		Saw, vertical band metal cutting, gravity feed.			3	2,500	1,800
40	1	U70/71	Crest	OJDs-1218/Ojs-1218WRR	Ultrasonic immersion cleaning and drying machine.	0620ST447-0004/0120ST448-0003	2021	2	35,000	25,000
41	1				Manual machine tooling and accessories (Group) including, however not limited to mill and lathe tooling, chuckers and hand screw collets, collet closers and tooling, drill and mill vises, lathe chucks, indexers, drill chucks, sine plates, angle plates and set up blocks, tool bits, drills, cutters, related items.			3	10,000	6,000

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
42	1				Secondary support machines and equipment (Group) including, however not limited to pedestal grinders, disc and belt grinders, arbor press, ultrasonic cleaner, tool grinder, related items.			3	10,000	7,500
					QUALITY ASSURANCE AND INSPECTION EQUIPMENT					
43	1		Mitutoyo	HR500	Hardness tester, digital readout.	800111702		3	7,500	6,000
44	1	U55	FOBA	Vario S 20F	Laser marking machine, CNC, CO2 laser.	VD1202/015	2012	3	15,000	12,000
45	1		Brown & Sharpe	599-550S	Optical comparator, 14" diameter screen, Quadra-Chek 200 digital readouts.			3	4,000	3,200
46	1		Mitutoyo	PH3500	Optical comparator, 14" diameter screen, Quadra-Chek 200 digital readouts.	000761609		3	6,500	5,000
47	1	U68	Zeiss	O-Inspect 5/4/3	Coordinate measuring machine, bridge type, 18" x 21" base, probe, probe rack, PC computer, associated accessories.	185147	2021	2	150,000	120,000
48	1		OGP	Smartscope Flash 200	Optical inspection multisensor metrology system, elevating bridge, 200mm x 200mm x 150mm work area, associated computer and monitor, joystick control, workstation.	SVL2003206R	2012	3	30,000	22,000
49	1		OGP	Smartscope Flash 302	Optical inspection multisensor metrology system, elevating bridge, 300mm x 300mm x 250mm work area, associated computer and monitor, joystick control, workstation.	SVW3025270	2017	3	45,000	35,000
50	1		Mitutoyo	SJ-410	Surface roughness tester.	002661412		3	3,500	2,500

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
51	1				Precision and inspection tools and accessories (Group) including, however not limited to height gages, gage block and pin gage sets, dial indicators and bases, gage bore sets, thread gages, concentricity gages, bench micrometers, surface plates, micrometers and mic sets, verniers, scales, toolmakers scopes, related items.			3	50,000	30,000
					GENERAL SHOP SUPPORT EQUIPMENT					
52	2		Allsource	41500	Abrasive blast cabinets, 48", reach end, end opening doors, lighted, integral dust collector.			3	3,000	2,200
53	1	U62	Sullivan Palatek	25D4VFDAW	Air compressor, rotary screw, 25 hp.	1703170001	2017	3	7,500	5,000
54	1	U61	Sullivan Palatek	25D4VFDAW	Air compressor, rotary screw, 25 hp.	1703170002	2017	3	7,500	5,000
55	1		Sullivan Palatek	SPTX-120A-116	Air dryer, refrigerated.	53633	2017	3	2,500	1,800
56	1		Sullivan Palatek	SPTX-120A-116	Air dryer, refrigerated.	53632	2017	3	2,500	1,800
57	1				Air receiving tank, ~300 gallon.			3	1,000	750
58	1	U72	Empire	BBO	Basket blaster, bench top, with dust collector.	33875		3	2,000	1,500
59	1		Cold Jet	PCS 60-C001	Dry ice machine with storage cart.	01336	2019	3	28,000	22,000
60	1	U57	Tornado	99414	Floor buffer, walk behind, electric.			3	2,500	2,000
61	1	U56	Minuteman	E26	Floor scrubber, walk behind, electric.			3	7,500	6,000
62	1		Nissan	PH02A25	Forklift, ride on, LP, cushion tires, 5500# capacity.	008872	1991	3	6,000	4,500
63	1	U47	Skyjack	SJ III 3219	Lift, scissor, electric, 19' reach, 500# capacity.	255042	2006	3	5,000	4,000

Schedule A/B Part 8, Question 50

Schedule 1

Asset Summary

UMA PRECISION MACHINING, INC.

Machinery and Equipment Appraisal

Report Date: January 15, 2024

Effective Date: December 28, 2023

ITEM #	QTY	UNIT #	MFG	MODEL	DESCRIPTION	S/N OR VIN	YEAR/AGE	COND	FAIR MARKET VALUE	ORDERLY LIQUIDATION VALUE
64	1				Shop support equipment (Group) including, however not limited to work benches and tables, tool holder carts, bench scales, roto scrap bins, pallet racking, cantilever steel racking, shop carts, fans, transfer pumps, ladders, tool cabinets, related items.			3	50,000	35,000
					OFFICE AND BUSINESS ASSETS					
65	1				Office furniture and business equipment (Group) including, however not limited to desks, chairs, conference room furniture, reception station, PC work stations, printers and copiers, telephone system, security system, related items.			3	50,000	20,000
					TOTAL VALUE REPORTED				\$ 2,730,000	\$ 2,062,250
					LEASED EQUIPMENT					
66	1	Matsuura	MX-330		Machining center, vertical, CNC, 5 axis, rotary trunnion table, 90 position automatic tool changer, 40 taper spindle, Matsuura G-Tech 31i controls, LNS ChipBLASTER high pressure coolant, Fox WS2 mist collector, chip conveyor, Matsuura MX-330-PC10 rotary 10 position pallet changer, loading station, associated attributes and accessories.	23011	2023	2	550,000	500,000

Fill in this information to identify the case:

Debtor name	UMAPM Holding Company LLC
United States Bankruptcy Court for the:	District of Minnesota
Case number (If known):	24-43262

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 Creditor's name

Choice Financial Group

Describe debtor's property that is subject to a lien

Components & Other Raw Material, Finished Goods, See Schedule A/B Part 8, Question 50 Attachment, Office & Business Equipment, Accounts Receivable, Website, logo, etc., Work In Progress

Column A**Amount of claim**

Do not deduct the value of collateral.

Column B**Value of collateral that supports this claim**

\$ 2,460,000.00

\$ 2,530,706.27

Creditor's mailing address4501 23rd Ave. S.
Fargo, ND 58104

Describe the lien

Is the creditor an insider or related party?

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

U.S. Small Business Administration

Describe debtor's property that is subject to a lien

\$ 142,530.00

\$ Unknown

Creditor's mailing address330 2nd Ave. S.
#430, Minneapolis, MN 55401

Describe the lien

Creditor's email address, if known

Describe the lien

Is the creditor an insider or related party?

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 2,602,530.00

Debtor

UMAPM Holding Company LLC
Name

Case number (if known) 24-43262

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Amy Swedberg Maslon LLP, 225 South Sixth Street Suite 2900 Minneapolis, MN, 55402	Line 2. <u>1</u>	_____
Attorney General U.S. Department of Justice, 950 Pennsylvania Avenue NW Washington, DC, 20530	Line 2. <u>2</u>	_____
Isabel Casillas Guzman, SBA Administrator 409 3rd St. SW Washington, DC, 20416	Line 2. <u>2</u>	_____
U.S. Attorney Office for the District of Minnesota U.S. Courthouse, 300 South 4th Street, Suite 600 Attn: Civil Process Clerk Minneapolis, MN, 55415	Line 2. <u>2</u>	_____
	Line 2. _____	_____

Fill in this information to identify the case:

Debtor	UMAPM Holding Company LLC
United States Bankruptcy Court for the:	District of Minnesota
Case number (If known)	24-43262

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address Dist. Director of the IRS 30 E 7th St Stop 5700 Ste 1222 Saint Paul, MN 55101	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Taxes & Other Government Units	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)		
2.2 Priority creditor's name and mailing address Minnesota Department of Revenue P.O. Box 64447-BKY Bky Collection Div. Saint Paul, MN 55164-0447	As of the petition filing date, the claim is: \$ <u>Unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Taxes & Other Government Units	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>)		
2.3 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
Date or dates debt was incurred Last 4 digits of account number	Basis for the claim:	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u> </u>)		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Nonpriority creditor's name and mailing address	Date or dates debt was incurred	Last 4 digits of account number	Amount of claim	
				As of the petition filing date, the claim is: Check all that apply.	\$ _____
3.1	A & C Metals, Inc. 1475 92nd Ave NE Blaine, MN 55449			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 966.69
3.2	ADAMS PEST CONTROL 922 Hwy 55 Ste 100 PO Box 233 Medina, MN 55340-0233			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 190.13
3.3	All Industry Supplies 6250 Bunker Lake Blvd Anoka, MN 55303			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 119.88
3.4	Aramark/Vestis Vestis 25259 Network Place Chicago, IL 60673-1252			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 4,222.92
3.5	AST Compressors 212 1st Avenue NW Isanti, MN 55040			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 943.54
3.6	C. R. Services PO Box 278 Zimmerman, MN 55398			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 612.04
	Date or dates debt was incurred			Is the claim subject to offset?	
	Last 4 digits of account number			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁷ Nonpriority creditor's name and mailing address Carl Zeiss Industrial Quality 28867 NETWORK PLACE Chicago, IL 60673-1250	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,731.21
Basis for the claim: Suppliers or Vendors		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁸ Nonpriority creditor's name and mailing address Carr Lane Manufacturing Co. 4200 Carr Lane Court St Lours, MO 63119	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,369.07
Basis for the claim: Suppliers or Vendors		
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹ Nonpriority creditor's name and mailing address Carter Cleaning Company 554 3rd St NW Suite 101 Elk River, MN 55330	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,860.00
Basis for the claim: Suppliers or Vendors		
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰ Nonpriority creditor's name and mailing address Central McGowan, Inc - 139156 PO Box 1691 Minneapolis, MN 55480-1691	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 100.00
Basis for the claim: Services		
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹ Nonpriority creditor's name and mailing address Chase Card Services PO Box 15298 Wilmington, DE 19850	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 21,970.87
Basis for the claim: Credit Card Debt		
Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²	Nonpriority creditor's name and mailing address CINTAS P.O. BOX 88005 Chicago, IL 60680-1005	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 524.82
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹³	Nonpriority creditor's name and mailing address Concept Machine Tool Sales 15625 Medina Road Minneapolis, MN 55447	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 701.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹⁴	Nonpriority creditor's name and mailing address Culligan Water-Metro P.O.Box 77043 Minneapolis, MN 55480-7743	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 43.60
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹⁵	Nonpriority creditor's name and mailing address Electrolyzing, Inc. 20 Houghton Street Providence , RI 02904	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,653.33
		Basis for the claim: Services	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹⁶	Nonpriority creditor's name and mailing address Finken Great Glacier P.O. Box 7190 St Cloud, MN 56302-7190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 736.05
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁷	Nonpriority creditor's name and mailing address Fox Valley Metrology 3114 Medalist Drive Oshkosh, WI 54902	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 833.71
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹⁸	Nonpriority creditor's name and mailing address Hilliard Heating & Cooling, Inc 13790 268th Ave NW Zimmerman, MN 55398	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,830.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ¹⁹	Nonpriority creditor's name and mailing address Hudson Hardware PO Box 158 Zimmerman, MN 55398	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 194.64
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²⁰	Nonpriority creditor's name and mailing address Keyport Technical Search LLC 1740 Pheasant Cir Chanhassen, MN 55331	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12,666.66
		Basis for the claim: Services	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²¹	Nonpriority creditor's name and mailing address Kim Controls 10045 Davenport Street Northeast Blaine, MN 55449	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 123.50
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²²	Nonpriority creditor's name and mailing address Liberty Clark, Inc. 19228 Industrial Blvd. NW Elk River, MN 55330	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 566.80
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²³	Nonpriority creditor's name and mailing address Lube-Tech 900 Mendelsohn Ave Golden Valley, MN 55427	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,051.05
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²⁴	Nonpriority creditor's name and mailing address Lube-Tech & Partners, LLC 29573 Network Place Chicago, IL 60673-1295	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 556.25
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²⁵	Nonpriority creditor's name and mailing address Marco Technologies, LLC. NW 7128 PO Box 1450 Minneapolis, MN 55485	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 190.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ²⁶	Nonpriority creditor's name and mailing address Midwest Industrial Tool Grinding PO BOX 549 Hutchinson, MN 55350-0549	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,007.17
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²⁷	Nonpriority creditor's name and mailing address MLW Marketing, Inc. 830 W Route 22, #47 Lake Zurich, IL 60047-2349	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 15.98
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ²⁸	Nonpriority creditor's name and mailing address NEMI 11841 243RD AVE NW Zimmerman, MN 55398	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 243.60
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ²⁹	Nonpriority creditor's name and mailing address NEXTIVA 8800 E Chaparral Rd Scottsdale, AZ 85250	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 287.55
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ³⁰	Nonpriority creditor's name and mailing address NORTH STAR COATING 6224 LAKELAND AVENUE NORTH SUITE 108 Brooklyn Park, MN 55428	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 640.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			
3. ³¹	Nonpriority creditor's name and mailing address Orrock Direct Industrial Courier, Inc. 12161 197th Court NW Elk River, MN 55330	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 390.00
Date or dates debt was incurred _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³²	Nonpriority creditor's name and mailing address OSI Environmental Inc 1000 Lund Blvd Anoka, MN 55303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,317.30
		Basis for the claim: Services	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³³	Nonpriority creditor's name and mailing address Productivity, Inc. 15120 25th Avenue N Plymouth, MN 55447	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 69,716.39
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³⁴	Nonpriority creditor's name and mailing address Quill.com PO Box 37600 Philadelphia, PA 19101-0600	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,665.88
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³⁵	Nonpriority creditor's name and mailing address RAY'S DIES AND TUBING 74 RAVEN DRIVE SWANTON Swanton, VT 05488	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,375.54
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³⁶	Nonpriority creditor's name and mailing address Ready Made Plastic Trays 960 E. Franklin Road Meridian, ID 86342	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 446.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³⁷	Nonpriority creditor's name and mailing address Rocky Mountain Construction Inc 13148 269th Ave Zimmerman, MN 55398	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,000.00
		Basis for the claim: Services	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³⁸	Nonpriority creditor's name and mailing address Source Machinery Sales 7421 Commerce Lane Fridley, MN 55432	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 201.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ³⁹	Nonpriority creditor's name and mailing address Staples Business 500 Staples Drive Framingham, MA 01702	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,163.38
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ⁴⁰	Nonpriority creditor's name and mailing address Sterling Plastics Inc. 375 Apollo Drive Lino Lakes, MN 55014	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,967.72
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	
3. ⁴¹	Nonpriority creditor's name and mailing address STREET FLEET PO BOX 130081 Roseville, MN 55113	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 435.69
		Basis for the claim: Services	
Is the claim subject to offset?			
Date or dates debt was incurred _____		<input checked="" type="checkbox"/> No	
Last 4 digits of account number _____		<input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁴²	Nonpriority creditor's name and mailing address TTC North America 2201 E 46th St Indianapolis, MN 46205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 387.00
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ⁴³	Nonpriority creditor's name and mailing address Twin City EDM & Mfg Inc. 7940 Ranchers Road N.E. Fridley, MN 55432	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,269.60
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ⁴⁴	Nonpriority creditor's name and mailing address TWIN CITY PLATING 641 Hoover St NE Minneapolis, MN 55413-3926	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,570.50
		Basis for the claim: Suppliers or Vendors	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ⁴⁵	Nonpriority creditor's name and mailing address U.S. Bank Marshall Equipment Finance 1310 Madrid St. Marshall, MN 56258	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 431.79
		Basis for the claim: Equipment Lease	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			
3. ⁴⁶	Nonpriority creditor's name and mailing address UMA Properties, LLC 26820 140th St. Attn: Tom McChesney, Manager Zimmerman, MN 55398	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 57,900.00
		Basis for the claim: Lease	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Date or dates debt was incurred _____			
Last 4 digits of account number _____			

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ⁴⁷	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Verde Plus Lawn Care, LLC P.O. Box 162 Zimmerman, MN 55398		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 236.24
			Basis for the claim: Services	
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Date or dates debt was incurred	_____		
	Last 4 digits of account number	_____		
3. ⁴⁸	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Voestalpine High Performance Metals Corp. PO Box 856088 Minneapolis, MN 55485-6088		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 301.12
			Basis for the claim: Suppliers or Vendors	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁹	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	Williams Equipment Fund LLC 12401 Lucas Lane Louisville, KY 40223		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 10,000.00
			Basis for the claim: Equipment Lease	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁰	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
	WIPFLI LLP PO Box 3160 Milwaukee, WI 53201-3160		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 33,510.74
			Basis for the claim: Services	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address		As of the petition filing date, the claim is: Check all that apply.	Amount of claim
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
			Basis for the claim:	
	Date or dates debt was incurred	_____	Is the claim subject to offset?	
	Last 4 digits of account number	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Andrew M. Luger, U.S. Attorney for the District of Minnesota U.S. Courthouse, 300 South 4th Street Suite 600 Minneapolis, MN 55415	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	
4.2.	Attorney General U.S. Department of Justice, 950 Pennsylvania Avenue NW Washington, DC 20530	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	
4.3.	Cynthia L. Hegarty Winthrop & Weinstein, Capella Tower, 225 South Sixth Street Suite 3500 Minneapolis, MN, 55402	Line <u>3.46</u> <input type="checkbox"/> Not listed. Explain: _____	
4.4.	Danny Werfel, Commissioner 1111 Constitution Ave NW Washington, DC 20224	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	
4.1.	Dist. Counsel of the IRS 380 Jackson St. Ste 650 Saint Paul, MN 55101	Line <u>2.1</u> <input type="checkbox"/> Not listed. Explain: _____	
4.5.	Keith Ellison, MN Attorney General 445 Minnesota Street Suite 600 Saint Paul, MN 55101	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain: _____	
4.6.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	
4.7.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	
4.8.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	
4.9.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	
4.10.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	
4.11.		Line _____ <input type="checkbox"/> Not listed. Explain: _____	

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.**

		Total of claim amounts
5a.	Total claims from Part 1	5a. \$ <u>0.00</u>
5b.	Total claims from Part 2	5b. + \$ <u>272,237.95</u>
5c.	Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>272,237.95</u>

Fill in this information to identify the case:

Debtor name UMAPM Holding Company LLC
United States Bankruptcy Court for the: District of Minnesota
Case number (If known): 24-43262 Chapter 11

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1	State what the contract or lease is for and the nature of the debtor's interest 26833 5th Street W, Zimmerman, MN 55398 Lessee State the term remaining ~62 months	UMA Properties, LLC 26820 140th St. Attn: Tom McChesney, Manager Zimmerman, MN, 55398
2.2	State what the contract or lease is for and the nature of the debtor's interest Matsuura MX-330 (SN23011) Lessee State the term remaining ~71 months	Williams Equipment Fund LLC 12401 Lucas Lane Louisville, KY, 40223
2.3	State what the contract or lease is for and the nature of the debtor's interest Ricoh C2004EX Copier Lessee State the term remaining ~44 months	U.S. Bank Marshall Equipment Finance 1310 Madrid St. Marshall, MN, 56258
2.4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	
2.5	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	

Fill in this information to identify the case:

Debtor name UMAPM Holding Company LLC

United States Bankruptcy Court for the: District of Minnesota

Case number (if known): 24-43262

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	Check all schedules that apply:
Name	Mailing address	Name	
2.1			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name	UMAPM Holding Company LLC
United States Bankruptcy Court for the:	District of Minnesota
Case number (If known):	24-43262

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2024</u> <u>MM / DD / YYYY</u>	to	Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ 2,835,167.56
For prior year:	From <u>01/01/2023</u> <u>MM / DD / YYYY</u>	to	<u>12/31/2023</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ 3,381,037.21
For the year before that:	From <u>01/01/2022</u> <u>MM / DD / YYYY</u>	to	<u>12/31/2022</u> <u>MM / DD / YYYY</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other \$ 3,669,663.14

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From	<u>MM / DD / YYYY</u>	Filing date	\$ _____
For prior year:	From	<u>MM / DD / YYYY</u>	<u>MM / DD / YYYY</u>	\$ _____
For the year before that:	From	<u>MM / DD / YYYY</u>	<u>MM / DD / YYYY</u>	\$ _____

Debtor

UMAPM Holding Company LLC
Name

Case number (if known) 24-43262

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/23 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Attached SOFA Part 2, Question 3 Creditor's name		\$ 215,580.95	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name		\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. UMA Properties LLC Insider's name 26820 140th St. Attn: Tom McChesney, Manager Zimmerman, MN 55398-8724		\$ 168,223.00	Real Property Lease
Relationship to debtor			
Affiliate			
4.2. Williams Equipment Fund LLC			
Insider's name 12401 Lucas Lane Louisville, KY 40223		\$ 10,000.00	Equipment Lease
Relationship to debtor			
Affiliate/Relative			

Debtor UMAPM Holding Company LLC
Name _____ Case number (if known) 24-43262 _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____	_____	_____	\$ _____

5.2.

Creditor's name _____ \$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____	_____	_____	\$ _____

Last 4 digits of account number: XXXX- _____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. UMA Properties, LLC v. UMAPM Holding Company, LLC	Eviction	Sherburne County District Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

71-cv-24-1570

Case title	Court or agency's name and address	Pending
7.2.	13880 Business Center Drive NW Elk River, MN 55330	<input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	_____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor UMAPM Holding Company LLC Case number (if known) 24-43262
Name _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Custodian's name and address	Description of the property	Value
Custodian's name _____	_____	\$ _____
Case title _____	Court name and address _____	
Case number _____	Name _____	
Date of order or assignment _____		

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name _____	_____	_____	\$ _____
	_____	_____	\$ _____
Recipient's relationship to debtor			
9.2. Recipient's name _____	_____		\$ _____
Recipient's relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.	List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	_____	\$ _____
	_____	_____	\$ _____

Debtor

UMAPM Holding Company LLC

Name

Case number (if known) 24-43262

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1. Sapientia Law Group PLLC		11/21/2024	\$ 50,000.00

Address

120 South 6th Street
Suite 100
Minneapolis, MN 55402

Email or website address

Who made the payment, if not debtor?

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2. _____		_____	\$ _____

Address

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee		_____	\$ _____

Debtor

UMAPM Holding Company LLC

Name

Case number (if known) 24-43262

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
------------------------	--	------------------------	-----------------------

13.1. _____ \$ _____

Address

Relationship to debtor

Who received transfer?

_____ \$ _____

13.2. _____

Address

Relationship to debtor

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
---------	--------------------

14.1. From _____ To _____

14.2. From _____ To _____

Debtor

UMAPM Holding Company LLC
Name

Case number (if known) 24-43262

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

No.

Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- No
- Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan

Employer identification number of the plan

EIN: _____

Has the plan been terminated?

- No
- Yes

Debtor UMAPM Holding Company LLC Name Case number (if known) 24-43262

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. _____ Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. _____ Name _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____	Address _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____	Address _____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

UMAPM Holding Company LLC
Name

Case number (if known) 24-43262

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Boston Scientific Name 4100 Hamline Ave. N. Saint Paul, MN 55112	26833 5th Street W. Zimmerman, MN 55398	Raw Materials	\$ Unknown

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		

Debtor UMAPM Holding Company LLC Case number (if known) 24-43262
Name _____

24. Has the debtor notified any governmental unit of any release of hazardous material?

- No
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
---	-------------------------------------	---

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
---	-------------------------------------	---

Business name and address Name _____	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
---	-------------------------------------	---

Debtor UMAPM Holding Company LLC _____ Case number (if known) 24-43262 _____
Name _____

26. Books, records, and financial statements

- 26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address

Dates of service

26a.1.

Name _____

From _____

To _____

Name and address

Dates of service

26a.2.

Name _____

From _____

To _____

- 26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address

Dates of service

26b.1.

WIPFLI LLP

Name
P.O. Box 3160, Milwaukee, WI 53201-3160

From 01/01/2020

To 12/31/2022

Name and address

Dates of service

26b.2.

Name _____

From _____

To _____

- 26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address

If any books of account and records are unavailable, explain why

26c.1.

Name _____

Debtor

UMAPM Holding Company LLC

Name

Case number (if known) 24-43262

Name and address

If any books of account and records are unavailable, explain why

26c.2.

Name

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

26d.1. Choice Financial Group

Name

4501 23rd Ave. S., Fargo, ND 58104

Name and address

26d.2. Prather Acquisition Company, LLC

Name

Corporation Trust Center, 1209 Orange St., Wilmington, DE 19801

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

Name and address of the person who has possession of inventory records

\$ _____

27.1.

Name

Debtor UMAPM Holding Company LLC _____ Case number (if known) 24-43262

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	\$ _____	_____

Name and address of the person who has possession of inventory records

27.2.

Name _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Prather Acquisition Company, LLC	Corporation Trust Center, 1209 Orange St., Wilmington, DE 19801		80
McChesney Holdings, Inc.	26833 5th St. W, Zimmerman, MN 55398		20

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	To _____
_____	_____	_____	To _____
_____	_____	_____	To _____
_____	_____	_____	To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No

Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Tom McChesney Name 26820 140th St. Zimmerman, MN 55398-8724	0.00	_____	Unauthorized Post-Sale Personal Expenses

Relationship to debtor

Affiliate

Debtor UMAPM Holding Company LLC _____ Case number (if known) 24-43262 _____
Name _____

Name and address of recipient

30.2

Name _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
 Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
 Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/13/2024
MM / DD / YYYY

 /s/ John Siami

Printed name John Siami

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
 Yes

Continuation Sheet for Official Form 207

4) Payments or other transfers of property made within 1 year before filing this case that benefited any insider

QDP Technologies 6459 144 Ave. NW, \$48,000.00

Anoka, MN 55303

17) Pension Contributions

Insperity 401K Plan 76-0178498

26d) Creditors

McChesney Holdings, Inc. 26833 5th St. W, Zimmerman, MN 55398

Row Labels	Sum of Amount	Sum /< \$5,575: \$215,580.95
PROTE625	\$30,642.97	
Spencer Fane Llp	\$20,140.50	
UMA Properties LLC	\$19,379.45	
MVIN501	\$14,611.79	
Plastics International	\$14,540.67	
PROD301	\$13,354.45	
CONNEXUS ENERGY	\$12,487.71	
Mcmaster-Carr	\$11,833.24	
AMER701	\$10,625.36	
Chase Card Services	\$10,169.02	
Forecreu America, Inc.	\$9,978.80	
UPS	\$8,339.35	
RYCA701	\$8,021.12	
MIDWA501	\$6,896.11	
HAWK RIDGE SYSTEMS	\$6,413.82	
Integrated Technology, Inc	\$6,290.30	
Titanium Industries, Inc.	\$5,984.22	
Arrow Finishing Inc.	\$5,872.07	

Fill in this information to identify the case and this filing:

Debtor Name	UMAPM Holding Company LLC
United States Bankruptcy Court for the:	District of Minnesota
Case number (If known):	24-43262

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration_____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/13/2024
MM / DD / YYYY

 /s/ John Siami

Signature of individual signing on behalf of debtor

John Siami

Printed name

Manager

Position or relationship to debtor